Form **8871** (July 2000)

Political Organization Notice of Section 527 Status

OMB No. 1545-1693

General information			
1 Name of organization LIBERTARIA	NA PARTY		Employer identification number
2 Mailing address (P.O. Box or number		number)	
City or town, state, and ZIP code	٠ ٠ ٠	23228-026	···
3 E-mail address of organization	U V IT	- 3228- 026	<u> </u>
4a Name of custodian of records	4b Cu	ustodian's address	
MARC MONT		PO BOX 282	
5a Name of contact person	5b Cc	PO BOX 28	JA 23228
		PO BOX 28	765
MARC MON Business address of organization (if		RICHMOND ess shown above). Number, street, ar	VA 23228
	different from mailing addr	ess snown above). Number, street, ar	ad room or suite number
City or town, state, and ZIP code			
Part II Purpose	- 2.5		
7 Describe the purpose of the organiz	ation		
J)		
POLITICAL P	ARIT		•••••
•••••••••••	***************************************		
	•••••••		
Part III List of All Related E	ntities (see instruction	<i>a</i>	
8a Name of related entity	8b Relationship	8c Address	
	- Controller	7,00,000	
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